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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Robert First name E Middle name Studzinski Last name and Suffix (Sr., Jr., II, III) | Maryann First name T Middle name Studzinski Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-3236 | xxx-xx-8097 |

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Debtor 1 Robert E Studzinski
Debtor 2 Maryann T Studzinski

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|----|--|---|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ■ I have not used any business name or EINs. Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 7610 Violet Lane Joliet, IL 60431 | If Debtor 2 lives at a different address: | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Will County | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |

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Robert E Studzinski Debtor 1 Debtor 2 Maryann T Studzinski Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? □ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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| Deb | tor 2 Maryann I Studzii | nski | | | Case number (if known) | | |
|-----|---|--------------------|---------------------------------------|---|--|--|--|
| | | | | | | | |
| Par | Report About Any Bu | sinesses | You Own | as a Sole Proprie | tor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of bus | siness | | |
| | A sole proprietorship is a | | | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Sta | te & ZIP Code | | |
| | it to this petition. | | Checi | k the appropriate bo | ox to describe your business: | | |
| | | | | Health Care Busir | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | lefined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | e | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | s. If you ir | dicate that you are ow statement, and f | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure | | |
| | For a definition of small | ■ No. | No. I am not filing under Chapter 11. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code. | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Dow | Depart if You Own or | Have An | , Uomondo | Dronorty or An | y Property That Needs Immediate Attention | | |
| Par | Do you own or have any | | пагагис | us Property of All | y Property That Needs infinediate Attention | | |
| 14. | property that poses or is | ■ No. | | | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number, Street, City, State & Zip Code | | |
| | | | | | | | |

Debtor 1

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Debtor 1 Robert E Studzinski
Debtor 2 Maryann T Studzinski

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-19570 Doc 1 Filed 06/14/16 Entered 06/14/16 17:23:35 Desc Main Document Page 6 of 57

| | tor 1 tor 2 | Robert E Studzins Maryann T Studzir | | Document | | _ | nber (if known) | | |
|------|----------------|--|----------------------|--|--|--------------------------------|---|----------------------|--|
| Part | t 6: | Answer These Questi | ons for Re | eporting Purposes | | | | | |
| 16. | | t kind of debts do have? | 16a. | individual primarily for a personal, | | | efined in 11 U.S.C. § 101(8) as "incurre | ed by an | |
| | | | | □ No. Go to line 16b. | | | | | |
| | | | 4.01 | ■ Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain | | | | | |
| | | | 16b. | money for a business or investmen | | | | | |
| | | | | ☐ No. Go to line 16c. | | | | | |
| | | | | ☐ Yes. Go to line 17. | | | | | |
| | | | 16c. | State the type of debts you owe that | at are not consumer | debts or busir | ness debts | | |
| 17. | | ou filing under oter 7? | □ No. | I am not filing under Chapter 7. Go | to line 18. | | | | |
| | after prop | ou estimate that any exempt erty is excluded and | ■ Yes. | I am filing under Chapter 7. Do you are paid that funds will be available | | | roperty is excluded and administrative ors? | expenses | |
| | | administrative expenses are paid that funds will | | ■ No | | | | | |
| | distr | vailable for ibution to unsecured itors? | | ☐ Yes | | | | | |
| 18. | | many Creditors do | 1 -49 | | 1 ,000-5,000 | | 2 5,001-50,000 | | |
| | you owe | estimate that you ? | □ 50-99 | | ☐ 5001-10,000 | | ☐ 50,001-100,000 | | |
| | | | ☐ 100-19 ☐ 200-99 | | ☐ 10,001-25,000 | | ☐ More than100,000 | in More than 100,000 | |
| 19. | | much do you | □ \$0 - \$9 | • | 1 \$1,000,001 - \$10 | | □ \$500,000,001 - \$1 billion | | |
| | | nate your assets to orth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | | □ \$1,000,000,001 - \$10 billio □ \$10,000,000,001 - \$50 billi | | |
| | | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$ | | ☐ More than \$50 billion | OII | |
| 20. | | much do you nate your liabilities | □ \$0 - \$9 | , | □ \$1,000,001 - \$10 | | □ \$500,000,001 - \$1 billion | | |
| | to be | | | 01 - \$100,000 001 - \$500,000 | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | | □ \$1,000,000,001 - \$10 billio □ \$10,000,000,001 - \$50 bill | | |
| | | | . , | 001 - \$1 million | \$100,000,001 - \$ | | ☐ More than \$50 billion | | |
| Part | t 7: | Sign Below | | | | | | | |
| For | you | | I have ex | amined this petition, and I declare u | ınder penalty of perju | iry that the info | ormation provided is true and correct. | | |
| | | | | | | | ole, under Chapter 7, 11,12, or 13 of title choose to proceed under Chapter 7. | e 11, | |
| | | | | rney represents me and I did not part, I have obtained and read the notice | | | not an attorney to help me fill out this | | |
| | | | I request | relief in accordance with the chapte | er of title 11, United S | states Code, s | pecified in this petition. | | |
| | | | | cy case can result in fines up to \$25 | | | y or property by fraud in connection wit 0 years, or both. 18 U.S.C. §§ 152, 134 | | |
| | | | /s/ Robe | ert E Studzinski | | | Studzinski | | |
| | | | | E Studzinski e of Debtor 1 | | aryann T Sto gnature of Deb | | | |
| | | | Executed | on June 14, 2016 MM / DD / YYYY | Ex | | June 14, 2016 //M / DD / YYYY | | |

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| Debtor 1 Robert E Stud Debtor 2 Maryann T Stu | | Page 7 of 57 | se number (if known) | |
|---|--|--|--|--|
| inalyalii i ota | MALITISKI | | _ | |
| For your attorney, if you and represented by one lif you are not represented an attorney, you do not ne | under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify and, in a case in which § 707(b)(4)(D) applies | ted States Code, and have that I have delivered to the | explained the relief ava debtor(s) the notice re- | hilable under each chapter quired by 11 U.S.C. § 342(b) |
| to file this page. | ou somedies med with the petition is mostreet. | | | |
| | /s/ Joseph R. Doyle | Date | June 14, 2016 | |
| | Signature of Attorney for Debtor | | MM / DD / YYYY | |
| | Joseph R. Doyle Printed name | | | |
| | Bizar & Doyle, LLC | | | |

Email address

Firm name

Suite 205

6279065Bar number & State

123 West Madison Street

Chicago, IL 60602 Number, Street, City, State & ZIP Code

Contact phone 312-427-3100

joe@bizardoylelaw.com

Case 16-19570 Doc 1 Filed 06/14/16 Entered 06/14/16 17:23:35 Desc Main Page 8 of 57 Document Robert E Studzinski Debtor 1 Debtor 2 Maryann T Studzinski Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1** 25,001-50,000 1-49 **1**,000-5,000 you estimate that you **5001-10,000 50,001-100,000** □ 50-99 owe? □ 10.001-25.000 ☐ More than 100,000 100-199 **200-999** 19. How much do you **□** \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50.001 - \$100.000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million **\$100,001 - \$500,000** □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sian Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can resultin fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, an Robert E Studzinski Maryanå T Studzinski Signature of Debtor 1 Signature of Debtor 2 Executed on Executed on

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Robert E Studzinski Debtor 1 Debtor 2 Maryann T Studzinski

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

re of Attorney

Date

Joseph R. Doyle Printed name

Bizar & Doyle, LLC

123 West Madison Street

Suite 205

Chicago, IL 60602 Number, Street, City, State & ZIP Code

Contact phone 312-427-3100

Email address

joe@bizardoylelaw.com

6279065

Bar number & State

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| Fill in this infor | mation to identify you | r casa. | | | |
|---------------------|--|----------------------------|---|---|--|
| Debtor 1 | Robert E Studzir | | | | |
| 20210. 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | Maryann T Studa | zineki | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | · | | heck if this is an mended filing |
| btaining money | is form whenever you y or property by fraud 8 U.S.C. §§ 152, 1341, | in connection with a bank | s or amended schedules. kruptcy case can result in | Making a false statement, conc n fines up to \$250,000, or impriso | ealing property, or onment for up to 20 |
| Sig | n Below | | | | |
| Did you pa | y or agree to pay som | eone who is NOT an attor | rney to help you fill out b | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. I | Name of person | | | Attach Bankruptcy Petiti Declaration, and Signatu | |
| Under\pena | alty of perjury I beclare | e that I have read the sum | ımary and schedules filed | d with this declaration and | |
| that they ar | e true and correct. G WWW t E Studzinski | M | × Mary | OM J. SHUM Studzinski | 111 |
| | ire of Debtor 1 | o | Signature of | | |

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|------------------|-----------------------------|---|---------------------------------|---|---|--|--|
| | otor 1 otor 2 | Robert E Studzinski Maryann T Studzinsk | | | Ü | Case number (if known) | |
| 25. | Have | you notified any governm | nental unit of a | anv release of hazard | lous material? | | |
| | _ | | | , | | | |
| | | No Yes. Fill in the details. | | | | | |
| | | e of site ress (Number, Street, City, State | and ZIP Code) | Governmental (Address (Number ZIP Code) | unit r, Street, City, State and | Environmental law, if you know it | Date of notice |
| 26. | Have | you been a party in any ju | udicial or adm | inistrative proceedin | g under any enviro | onmental law? Include settlement | s and orders. |
| | ■ . ! □ ` | No Yes. Fill in the details. | | | | | |
| | | e Title e Number | | Court or agency Name Address (Number State and ZIP Code) | r, Street, City, | Nature of the case | Status of the case |
| Par | t 11: | Give Details About Your | Business or 0 | Connections to Any E | Business | , | |
| 27. | | ☐ A sole proprietor or se☐ ☐ A member of a limited ☐ ☐ A partner in a partners | If-employed in | n a trade, profession, any (LLC) or limited l | or other activity, e | of the following connections to a wither full-time or part-time o (LLP) | ny business? |
| | | ☐ An officer, director, or | | | | | |
| | _ | ☐ An owner of at least 5% | • | | of a corporation | | |
| | | No. None of the above app | olies. Go to P | art 12. | | | |
| | | Yes. Check all that apply a | above and fill | | | | |
| | Add | ness Name ress per, Street, City, State and ZIP Cod | ie) | Name of accountant | | Employer Identification numb Do not include Social Securit | |
| | | | | | | Dates business existed | |
| 28. | Withi | n 2 years before you filed utions, creditors, or other | for bankrupter parties. | cy, did you give a fina | ancial statement to | o anyone about your business? In | clude all financial |
| | _ | No Yes. Fill in the details belo | ow. | | | | |
| | | ne ress ber, Street, City, State and ZIP Cod | de) | Date Issued | | | |
| Pa | rt 12: | Sign Below | | | | | |
| are w N 18 | true a n a bar y.s.c. | nd correct. I understand the high properties of the high properties | hat making a n fines up to ! | false statement, cond \$250,000, or imprisor Maryarin 1 | cealing property, on the control of | d I declare under penalty of perjurer obtaining money or property by years, or both. | |
| Da | gnatur te | e of Debtor 1 Ý - (5 - (4 | | Signature o | 4-15 | -14 | |
| | - | ttach additional pages to | Your Stateme | ent of Financial Affair | s for Individuals Fi | iling for Bankruptcy (Official Form | 107)? |
| Did | you p | ay or agree to pay someo | ne who is not | an attorney to help y | you fill out bankrup | ptcy forms? | |
| ■ □ · | | ame of Person . Atta | ich the <i>Bankru</i> | ptcy Petition Preparer' | 's Notice. Declaratio | n, and Signature (Official Form 119) | |
| | cial Forr | | | ent of Financial Affairs | | - , | page |
| | | | | | | | and the second s |

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| Debtor 1 Robert E Studzinski Debtor 2 Maryann T Studzinski | Case number (# known) | | | |
|--|--|--|--|--|
| securing debt: | | | | |
| Creditor's Caliber Home Loans, In name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No | | |
| Description of property securing debt: Real estate located at 26249 Rachale Dr, Channahon IL 60410 | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes | | |
| Part 2: List Your Unexpired Personal Property Leas For any unexpired personal property lease that you list in the information below. Do not list real estate leases. You may assume an unexpired personal property lease | ted in Schedule G: Executory Contracts and Un Unexpired leases are leases that are still in effe | ect; the lease period has not yet ended. | | |
| Describe your unexpired personal property leases | | Will the lease be assumed? | | |
| Lessor's name: Description of leased | | □ No | | |
| Property: | | ☐ Yes | | |
| Lessor's name: Description of leased | | □ No | | |
| Property: | | ☐ Yes | | |
| Lessor's name: | | □ No | | |
| Description of leased Property: | | ☐ Yes | | |
| Lessor's name: | | □ No | | |
| Description of leased Property: | | ☐ Yes | | |
| Lessor's name: | | | | |
| Description of leased Property: | | □ No | | |
| Property. | | ☐ Yes | | |
| Lessor's name: Description of leased | | □ No | | |
| Property: | | ☐ Yes | | |
| Lessor's name: | | □ No | | |
| Description of leased Property: | | □ Yes | | |
| Part 3: Sign Below | | | | |
| Under penalty of perjury I declare that I have indicated property that is subject to an unexpired lease. X Robert E Studzinski Signature of Debtor 1 | x Maryann T Studzinski Signature of Debtor 2. | hat secures a debt and any personal | | |
| Date 4. (5 - (6 | Date $Q - D$ | 5-16 | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| | | | III FAUE 13 01 37 | |
|---------------------|--------------------------|-------------------|-------------------|----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Maryann T Studz | inski | | |
| (Spouse if, filing) | | | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | Last Name Last Name |
| (if known) | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | t 1: Summarize Your Assets | | |
|-----|---|--------------------|-------------------------------|
| | | Your as Value o | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 116,100.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 116,100.0 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 20,090.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 79,799.0 |
| | Your total liabilities | \$ | 99,889.00 |
| Paı | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,884.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 6,152.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bousehold purpose "11 LLS C. & 101(8). Fill out lines 8-9g for statistical purposes. 28 LLS C. & 159 | | family, or |

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known)

Debtor 1 Robert E Studzinski Document Page 14 of 57

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9,128.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tot | al claim |
|--|-----|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Debtor 2

Maryann T Studzinski

| | С | ase 16-19570 Doo | _ | Entered 06/14/ Page 15 of 57 | 16 17:23:35 | Desc | Main |
|-------------------|---|---|--|--|-----------------------------------|--------------|---|
| Fill in | this info | rmation to identify your case | Document e and this filing: | Page 15 01 57 | | | |
| Debto | | Robert E Studzinski | J | | | | |
| 20010 | | First Name | Middle Name | Last Name | | | |
| Debto | or 2 e, if filing) | Maryann T Studzinsk | Middle Name | Last Name | | | |
| | | | | | | | |
| United | d States B | ankruptcy Court for the: NO | RTHERN DISTRICT OF ILLII | NOIS | | | |
| Case | number | | | _ | | | Check if this is an |
| | | | | | | | amended filing |
| | | | | | | | |
| Offi | cial Fo | orm 106A/B | | | | | |
| Scl | hedu | le A/B: Proper | ty | | | | 12/15 |
| hink it nforma | fits best. ation. If mo r every que | Be as complete and accurate as ore space is needed, attach a se estion. | ms. List an asset only once. If a spossible. If two married people parate sheet to this form. On the nd, or Other Real Estate You Ov | e are filing together, both a e top of any additional pag | re equally responsible | e for supply | ying correct |
| | | _ | | | | | |
| . DO) | ou own or | nave any legal or equitable inte | erest in any residence, building, | iand, or similar property? | | | |
| | No. Go to Pa | art 2. | | | | | |
| ☐ Y | es. Where | is the property? | | | | | |
| Part 2 | Describe | e Your Vehicles | | | | | |
| someo | ne else di | | ole interest in any vehicles, vehicles in the state of th | | | any vehic | les you own that |
| | No | | | | | | |
| | ⁄es | | | | | | |
| | | | | | | | |
| 3.1 | Make: | Chevrolet | Who has an interest in th | e property? Check one | | | s or exemptions. Put aims on Schedule D: |
| | Model: Year: | Malibu 2011 | Debtor 1 only | | Creditors Who Ha | ve Claims S | Secured by Property. |
| | | ate mileage: 45,000 | Debtor 2 only ■ Debtor 1 and Debtor 2 only | only | Current value of entire property? | | urrent value of the ortion you own? |
| | Other info | | At least one of the debt | • | chare property. | P | ordon you own: |
| | Value b | ased on NADA | | | \$0.05 (| | \$0.050.00 |
| | | | Check if this is comm (see instructions) | unity property | \$8,350 |).00 | \$8,350.00 |
| | | | _ | | | | |
| 3.2 | Make: | Chevrolet | Who has an interest in th | e property? Check one | | | s or exemptions. Put aims on <i>Schedule D:</i> |
| | Model: | Malibu | | | | | Secured by Property. |
| | Year: | 2013 | Debtor 2 only | | Current value of | the C | urrent value of the |
| | | ate mileage: 30,600 | | • | entire property? | | ortion you own? |
| | Other info | rmation: | At least one of the debt | ors and another | | | |

Official Form 106A/B Schedule A/B: Property page 1

☐ Check if this is community property (see instructions)

\$11,300.00

\$11,300.00

Entered 06/14/16 17:23:35 Case 16-19570 Doc 1 Filed 06/14/16 Desc Main Page 16 of 57 Document Robert E Studzinski Debtor 1 Debtor 2 Case number (if known) Maryann T Studzinski Do not deduct secured claims or exemptions. Put **Toyota** 3.3 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Camry ☐ Debtor 1 only Creditors Who Have Claims Secured by Property. Model 1996 Year: Debtor 2 only Current value of the Current value of the 172,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$1,200,00 \$1,200,00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$20,850.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Miscellaneous used household goods \$1,650.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$425.00 Miscellaneous electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe..... \$150.00 Miscellaneous books, tapes, CD's, etc. 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Schedule A/B: Property

Official Form 106A/B

No

☐ Yes. Describe.....

Entered 06/14/16 17:23:35 Case 16-19570 Doc 1 Filed 06/14/16 Desc Main Document Page 17 of 57 Debtor 1 Robert E Studzinski Debtor 2 Maryann T Studzinski Case number (if known) 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$600.00 Personal used clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$120.00 Miscellaneous costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,945.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **TCF Bank** \$44.00 Checking 17.1. **Private Bank** \$2,261.00 Checking 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

Schedule A/B: Property

■ No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

Entered 06/14/16 17:23:35 Case 16-19570 Doc 1 Filed 06/14/16 Desc Main Page 18 of 57 Document Robert E Studzinski Debtor 1 Debtor 2 Maryann T Studzinski Case number (if known) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Pension \$0.00 Pension through employer 401(k) through employer - 100% exempt \$90,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own?

portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

☐ Yes. Give specific information.....

Entered 06/14/16 17:23:35 Case 16-19570 Doc 1 Filed 06/14/16 Desc Main Page 19 of 57 Document Robert E Studzinski Debtor 1 Debtor 2 Maryann T Studzinski Case number (if known) 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Employer - Term Life Insurance - no \$0.00 Spouse cash surrender value Allstate Term Life Insurance - no cash \$0.00 Spouse surrender value 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$92.305.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.

☐ Yes. Go to line 38.

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above Case 16-19570 Doc 1 Filed 06/14/16 Entered 06/14/16 17:23:35 Desc Main Document Page 20 of 57

| Debtoi Debtoi | | Document | ——— | Case number (if known) | |
|------------------|--|----------------------|--------------|------------------------------|--------------|
| | you have other property of any kind you did examples: Season tickets, country club membersh | • | | | |
| | No | | | | |
| | Yes. Give specific information | | | | |
| 54. A | add the dollar value of all of your entries from | Part 7. Write that n | umber here | | \$0.00 |
| Part 8: | List the Totals of Each Part of this Form | | | | |
| 55. P | Part 1: Total real estate, line 2 | | | | \$0.00 |
| 56. P | Part 2: Total vehicles, line 5 | | \$20,850.00 | _ | |
| 57. P | Part 3: Total personal and household items, li | ne 15 | \$2,945.00 | | |
| 58. P | Part 4: Total financial assets, line 36 | | \$92,305.00 | | |
| 59. P | Part 5: Total business-related property, line 45 | 5 | \$0.00 | | |
| 60. P | Part 6: Total farm- and fishing-related property | y, line 52 | \$0.00 | | |
| 61. P | Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. T | otal personal property. Add lines 56 through 6 | 1 | \$116,100.00 | Copy personal property total | \$116,100.00 |
| 63. T | otal of all property on Schedule A/B. Add line | 55 + line 62 | | | \$116,100,00 |

Official Form 106A/B Schedule A/B: Property page 6

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| | | I A A J II I I I I | | |
|---|-------------------------|--------------------|-------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Maryann T Studz | inski | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Id | entify the | Property | / You C | Claim as | Exemp | ١t |
|------------|------------|----------|---------|----------|-------|----|
|------------|------------|----------|---------|----------|-------|----|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemptio |
|--|--------------------------------------|------|---|-----------------------------------|
| | Copy the value from Schedule A/B | Chec | ck only one box for each exemption. | |
| 2011 Chevrolet Malibu 45,000 miles Value based on NADA | \$8,350.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2013 Chevrolet Malibu 30,600 miles Value based on NADA | \$11,300.00 | | \$4,800.00 | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| 1996 Toyota Camry 172,000 miles | \$1,200.00 | | \$1,200.00 | 735 ILCS 5/12-1001(b) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Miscellaneous used household | \$1,650.00 | | \$1,650.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Miscellaneous electronics Line from Schedule A/B: 7.1 | \$425.00 | | \$425.00 | 735 ILCS 5/12-1001(b) |
| Ello Holli Gonoddio 772. 111 | | | 100% of fair market value, up to any applicable statutory limit | |

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Maryann T Studzinski Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Miscellaneous books, tapes, CD's, 735 ILCS 5/12-1001(a) \$150.00 \$150.00 Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit Personal used clothing 735 ILCS 5/12-1001(a) \$600.00 \$600.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Miscellaneous costume jewelry 735 ILCS 5/12-1001(b) \$120.00 \$120.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: TCF Bank** 735 ILCS 5/12-1001(b) \$44.00 \$44.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Private Bank** 735 ILCS 5/12-1001(b) \$2,261.00 \$2,261.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Pension: Pension through employer 735 ILCS 5/12-704 100% \$0.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401(k) through employer - 100% 735 ILCS 5/12-704 100% \$90,000.00 exempt Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Robert E Studzinski

Debtor 1

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| | | Document | Page 2: | 3 of 57 | | |
|---------------------------|--------------------|--|-----------------|---|---|---------------|
| Fill in this information | n to identify you | r case: | | | | |
| Debtor 1 Ro | obert E Studzi | nski | | | | |
| | st Name | Middle Name | Last Name | | | |
| Debtor 2 Ma | aryann T Stud | zinski | | | | |
| | st Name | Middle Name | Last Name | | | |
| United States Bankrupt | toy Court for the | NORTHERN DISTRICT OF ILI | LINOIS | | | |
| Officed States Barikrup | icy Court for the. | NORTHERN DISTRICT OF IEL | LINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | amend | ded filing |
| 000 : 15 40 | | | | | | |
| Official Form 10 | <u>6D</u> | | | | | |
| Schedule D: (| Creditors | Who Have Claims | Secure | d by Propert | У | 12/15 |
| B | | | | | | |
| | | f two married people are filing togeth out, number the entries, and attach it | | | | |
| number (if known). | 3., | , | | , | , | |
| 1. Do any creditors have | claims secured by | your property? | | | | |
| ☐ No. Check this b | oox and submit th | nis form to the court with your other | r schedules. Y | ou have nothing else t | o report on this form. | |
| ■ Yes. Fill in all of | the information l | nelow | | ŭ | · | |
| | | Delow. | | | | |
| Part 1: List All Sec | ured Claims | | | Column A | Column B | Column C |
| | | nore than one secured claim, list the cre a particular claim, list the other creditor | | y Amount of claim | | Unsecured |
| | | cal order according to the creditor's name. | | Do not deduct the | Value of collateral that supports this | portion |
| | | Ğ | | value of collateral. | claim | If any |
| 2.1 Ally Financial | | Describe the property that secures | | \$7,846.00 | \$11,300.00 | \$0.00 |
| Creditor's Name | | 2013 Chevrolet Malibu 30,60 | 00 miles | | | |
| | | Value based on NADA | | | | |
| 200 Renaissan | ice Ctr | As of the date you file, the claim is: | Check all that | | | |
| Detroit, MI 482 | | apply. Contingent | | | | |
| Number, Street, City, S | | ☐ Unliquidated | | | | |
| rumber, oneet, only, o | nate a zip code | ☐ Disputed | | | | |
| Who owes the debt? C | heck one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as | mortgage or se | ecured | | |
| Debtor 2 only | | car loan) | origago or oo | , ca. ca | | |
| ■ Debtor 1 and Debtor 2 | only | ☐ Statutory lien (such as tax lien, me | echanic's lien) | | | |
| ☐ At least one of the deb | , | ☐ Judgment lien from a lawsuit | • | | | |
| ☐ Check if this claim re | | Other (including a right to offset) | Lien on ve | hicle | | |
| community debt | | — Other (including a right to onset) | | | | |
| | 0 | | | | | |
| | Opened 12/01/14 | | | | | |
| | Last Active | | | | | |
| Date debt was incurred | 2/13/15 | Last 4 digits of account num | ber 1792 | | | |
| | | - | | - | | |
| 2.2 Caf/Carmax Au | uto Finance | Describe the property that secures | the claim: | \$12,244.00 | \$8,350.00 | \$0.00 |
| Creditor's Name | | 2011 Chevrolet Malibu 45,00 | | | | |
| | | Value based on NADA | | | | |
| Attn: Bankrupt | tcy | A control of the cont | | | | |
| Po Box 440609 |) | As of the date you file, the claim is: apply. | Check all that | | | |
| Kennesaw, GA | 30160 | ☐ Contingent | | | | |
| Number, Street, City, S | tate & Zip Code | ☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the debt? C | heck one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as | mortgage or se | ecured | | |
| Debtor 2 only | | car loan) | | | | |
| ■ Debtor 1 and Debtor 2 | only | ☐ Statutory lien (such as tax lien, me | echanic's lien) | | | |
| ☐ At least one of the deb | tors and another | ☐ Judgment lien from a lawsuit | | | | |

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| Debtor 1 | Robert E S | Studzinski | | Case | number (if know) | |
|------------|--------------------------------|---|-------------------------------------|------------------|------------------|--|
| | First Name | Middle Nam | ne Last Name | | | |
| Debtor 2 | Maryann T | Γ Studzinski | | | | |
| | First Name | Middle Nam | ne Last Name | | | |
| | if this claim re unity debt | elates to a | Other (including a right to offset) | Lien on vehicle | | |
| Date debt | was incurred | Opened 9/01/14 Last Active 2/06/15 | Last 4 digits of account nur | nber <u>7604</u> | | |
| Add the | dollar value of | f vour entries in Col | umn A on this page. Write that nu | mber here: | \$20,090.00 | |
| If this is | | of your form, add th | e dollar value totals from all page | | \$20,090.00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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|--|---|--|---|---|
| Fill in this infor | rmation to identify your case: | | | |
| Debtor 1 | Robert E Studzinski | | | |
| | | lle Name Last Name | | |
| Debtor 2 | Maryann T Studzinski | | | |
| (Spouse if, filing) | First Name Midd | fle Name Last Name | | |
| United States B | ankruptcy Court for the: NORTHI | ERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| Official For Schedule I | m 106E/F E/F: Creditors Who Ha | ve Unsecured Claims | | 12/15 |
| any executory con Schedule G: Exec Schedule D: Cred left. Attach the Co name and case nu | , | result in a claim. Also list executory is (Official Form 106G). Do not include operty. If more space is needed, copy ive no information to report in a Part, | contracts on Schedule A/B: Property of any creditors with partially secured of the Part you need, fill it out, number t | (Official Form 106A/B) and on claims that are listed in the entries in the boxes on the |
| | All of Your PRIORITY Unsecured (tors have priority unsecured claims ag | | | |
| No. Go to | , , | amst you: | | |
| | Part 2. | | | |
| Yes. | All of Your NONPRIORITY Unsecu | and Claims | | |
| Yes. 4. List all of you unsecured cla | ur nonpriority unsecured claims in the liter, list the creditor separately for each clitor holds a particular claim, list the other | alphabetical order of the creditor who aim. For each claim listed, identify what | o holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea | ady included in Part 1. If more |
| ruitz. | | | | Total claim |
| | I Management Services | Last 4 digits of account number | 3564 | \$0.00 |
| 698 1/2 | ity Creditor's Name 2 South Ogden Street 5, NY 14206 | When was the debt incurred? | 2015 | |
| | Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who inc | urred the debt? Check one. | | | |
| ☐ Debto | or 1 only | ☐ Contingent | | |
| ☐ Debto | or 2 only | ☐ Unliquidated | | |
| Debto | or 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At lea | ast one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | k if this claim is for a community | ☐ Student loans | | |
| debt Is the cla | aim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did | d not |
| ■ No | | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | | ■ Other. Specify Collection Notice only | Account for One Main Financy. | cial. |

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| | 1 Robert E Studzinski 2 Maryann T Studzinski | | Case number (if know) | | | |
|-----|--|---|---|-------------|--|--|
| 4.2 | Citibank | Last 4 digits of account number | 1280 | \$8,276.00 | | |
| | Nonpriority Creditor's Name Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim in the content of the date you file, the claim in the content of the content | Opened 6/01/13 Last Active 12/12/14 | . , | | |
| | Who incurred the debt? Check one. | | | | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | ☐ Contingent☐ Unliquidated | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | |
| 4.3 | Citibank Sd, Na Nonpriority Creditor's Name | Last 4 digits of account number | 8296 | \$24,876.00 | | |
| | Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195 | When was the debt incurred? | Opened 4/01/84 Last Active 11/28/14 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | Street City State Zlp Code As of the date you file, the claim is: Check all that apply | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharin | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | |
| 4.4 | Citibank/The Home Depot | Last 4 digits of account number | 5216 | \$2,192.00 | | |
| | Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Spirat Lavia MO 62470 | When was the debt incurred? | Opened 8/01/10 Last Active 1/02/15 | | | |
| | Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | |
| | \square Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | No | Debts to pension or profit-sharing | | | | |
| | Yes | Other. Specify Charge Acc | count | | | |

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| | 1 Robert E Studzinski 2 Maryann T Studzinski | | Case number (if know) | |
|-----|--|--|--|------------|
| 4.5 | Diane T Nauer | Last 4 digits of account number | C334 | \$0.00 |
| | Nonpriority Creditor's Name 33 N Dearborn St. Suite 1301 Chicago, IL 60602 | When was the debt incurred? | 2016 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | At least one of the debtors and another | Student loans | d Claim. | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Collection And Notice only | Account for Syncrhony Bank. | |
| 4.6 | Discover Fin Svcs Llc | Last 4 digits of account number | 6360 | \$4,524.00 |
| | Nonpriority Creditor's Name | | Opened 3/01/06 Last Active | |
| | Po Box 15316 Wilmington, DE 19850 | When was the debt incurred? | 12/12/14 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.7 | Diversified Consultants, Inc. | Last 4 digits of account number | 8418 | \$0.00 |
| | Nonpriority Creditor's Name | | - | |
| | PO Box 1022 Wixom, MI 48393 | When was the debt incurred? | 2015 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | wation are an action of the state of the sta | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Collection | Account for AT&T. Notice only. | |

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| Debtor Debtor | 1 Robert E Studzinski 2 Maryann T Studzinski | | Case number (if know) | | |
|------------------|--|--|--|-------------|--|
| 4.8 | Elan Financial Service | Last 4 digits of account number | 7432 | \$10,676.00 | |
| | Nonpriority Creditor's Name 777 E Wisconsin Ave Milwaukee, WI 53202 | When was the debt incurred? | Opened 8/01/07 Last Active 12/19/14 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | |
| 4.9 | Fifth Third Bank | Last 4 digits of account number | 0107 | \$4,246.00 | |
| | Nonpriority Creditor's Name Fifth Third Bank Bankruptcy Department, 1830 East Paris Ave. Se | When was the debt incurred? | Opened 6/01/13 Last Active 1/02/15 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | |
| | No | Debts to pension or profit-sharing | | | |
| | Yes | ■ Other. Specify Credit Card | | | |
| 4.1 | Fifth Third Bank | Last 4 digits of account number | 3979 | \$3,942.00 | |
| | Nonpriority Creditor's Name Fifth Third Bank Bankruptcy Department, 1830 East Paris Ave. Se | When was the debt incurred? | Opened 6/01/13 Last Active 1/02/15 | | |
| | Grand Rapids, MI 49546 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ Check if this claim is for a community ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Credit Card | I | | |
| | | | | | |

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| Debto | Maryann T Studzinski | | Case number (if know) | | | | |
|-------|---|--|--|------------|--|--|--|
| .1 | First Step Group, LLC | Last 4 digits of account number | 2080 | \$0.00 | | | |
| | Nonpriority Creditor's Name 6300 Shingle Creek Parkway Suite 220 | When was the debt incurred? | 2015 | | | | |
| | Minneapolis, MN 55430 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | ☐ Yes | ■ Other. Specify Bank | Account for Cach/Fifth Third | | | | |
| .1 | Gemb/walmart | Last 4 digits of account number | 0161 | \$1,190.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 103104 | When was the debt incurred? | Opened 11/01/13 Last Active 12/15/14 | | | | |
| | Roswell, GA 30076 Number Street City State Zlp Code | As of the date you file, the claim i | s. Chack all that apply | | | | |
| | Who incurred the debt? Check one. | As of the date you me, the claim | S. Olleck all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharing | t-sharing plans, and other similar debts | | | | |
| | ☐ Yes | Other. Specify Charge Acc | count | | | | |
| .1 | IC System Inc | Last 4 digits of account number | 0422 | \$101.00 | | | |
| | Nonpriority Creditor's Name 444 Highway 96 East PO Box 64378 | When was the debt incurred? | 2016 | | | | |
| | Saint Paul, MN 55164 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Collection | Account for AT&T Midwest | | | | |
| | | | | | | | |

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| 2 Maryann T Studzinski | | Case number (if know) | |
|---|--|--|-------------|
| Meyer & Njus | Last 4 digits of account number | 3236 | \$0.00 |
| Nonpriority Creditor's Name 1100 US Bank Plaza 200 South Sixth Street | When was the debt incurred? | 2015 | |
| Minneapolis, MN 55402 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Card. Notice | Account for Walmart Credit ce only. | |
| Onemain Fi | Last 4 digits of account number | 1329 | \$10,424.00 |
| Nonpriority Creditor's Name Po Box 499 | When was the debt incurred? | Opened 10/01/14 Last Active 2/28/15 | |
| Hanover, MD 21076 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Unsecured | | |
| Sears/cbna | Last 4 digits of account number | 4756 | \$8,648.0 |
| Nonpriority Creditor's Name Po Box 6282 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 9/01/00 Last Active 12/12/14 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | ■ Other Specify Credit Card | | |
| 00 | - Other, Specify | • | |

Debtor 1 Robert E Studzinski

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| Debtor 1 Debtor 2 | | Case number (if know) | | | | | | |
|----------------------|---|---|-------------------------------------|----------|--|--|--|--|
| 4.1 | Syncb/discount Tire | Last 4 digits of account number | 2404 | \$704.00 | | | | |
| (| Nonpriority Creditor's Name C/o Po Box 965036 Orlando, FL 32896 | When was the debt incurred? | Opened 4/01/13 Last Active 12/19/14 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | |
| I | Debtor 1 only | ☐ Contingent | | | | | | |
| Ι | Debtor 2 only | ☐ Unliquidated | | | | | | |
| [| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| [| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| [| ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| I | No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| [| Yes | ■ Other. Specify Charge Acc | count | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

| | | | | I Olai Ciaiiii |
|--------------------------------|------------|---|------------|------------------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | 6f. | Student loans | 6f. | \$ Total Claim 0.00 |
| Total claims from Part 2 | 6g. 6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6g. 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 79,799.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 79,799.00 |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| | | 17/7/11/11/ | 10 1 100 10 10 11 | |
|---|-------------------------|-------------------|-------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Robert E Studzin | ski | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Maryann T Studz | inski | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with v | vhom you have the Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|----------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| 2.2 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | _ |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| | | | | | |

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| | | Docume | ent Page 33 d | of 57 | |
|------------------|--|-------------------------------|-------------------------|-------------------------|---|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Robert E Studzin | cki | | | |
| Debior 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | Maryann T Studz | inski | | | |
| (Spouse if, fili | | Middle Name | Last Name | | |
| United Sta | ites Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Officed Sta | nes bankruptcy Court for the. | NORTHERN DIGITAL | OI ILLIIVOIO | | |
| Case num | ber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Officia | LEarm 106H | | | | |
| | I Form 106H | _ | | | |
| Sched | lule H: Your Cod | ebtors | | | 12/15 |
| | | | | | |
| our name | and case number (if known) | . Answer every question | | | o of any Additional Pages, write |
| | , | you alo illing a joille cace, | ao | . 40 4 00 402.0 | |
| ■ No | | | | | |
| ☐ Yes | 5 | | | | |
| | hin the last 8 years, have you na, California, Idaho, Louisiana | | | | states and territories include |
| _ | | | | | |
| | Go to line 3. | | | | |
| ⊔ Yes | s. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| in line Form | e 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed th | g with you. List the person shown le creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Ochony 4 Vermendalitan | | | O. (0 Th | Para a contract of a data |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Check all schedule | ditor to whom you owe the debt s that apply: |
| | | | | | о |
| 3.1 | | | | Schedule D, line | e |
| | Name | | | ☐ Schedule E/F, li | ne |
| | | | | ☐ Schedule G, line | e |
| - | Number Street | | | <u>—</u> | |
| | City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | ☐ Schedule D, line | 3 |
| | Name | | | □ Schedule E/F, li | |
| | | | | ☐ Schedule G, line | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill in this information to identify your case: | l |
|---|---|
| Debtor 1 Robert E Studzinski | |
| Debtor 2 Maryann T Studzinski (Spouse, if filing) | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | |
| Case number | Check if this is: |
| (If known) | ☐ An amended filing |
| | ☐ A supplement showing postpetition chapter 13 income as of the following date: |
| Official Form 106I | MM / DD/ YYYY |
| Schedule I: Your Income | 12/15 |

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Describe Employment | | | | | |
|-----|---|----------------------|----------------------------------|--|--|--|
| 1. | Fill in your employment information. | | Debtor 1 | Debtor 2 or non-filing spouse | | |
| | If you have more than one job, | Fundament status | ■ Employed | ■ Employed | | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | ☐ Not employed | | |
| | employers. | Occupation | Foreman | Stock Clerk | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Central Steel & Wire | Jewel Foods | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 3000 W 51st Chicago, IL 60639 | 13460 Route 59 Plainfield, IL 60585 | | |
| | | How long employed th | nere? 38 years | 21 years | | |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 4,888.00 \$ 3,186.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

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| | tor 1 tor 2 | Robert E Studzinski Maryann T Studzinski | _ | | Case | e number (<i>if kn</i> e | own) | | | | | |
|-----|----------------|--|---------------|-----------|------------|---------------------------|------------|------------|------------------------|-------------|--------------------|---|
| | | | | | Fo | or Debtor 1 | | | or Debtor on-filing | | | |
| | Cop | y line 4 here | 4. | | \$_ | 4,888 | .00 | \$ | | ,186.00 | | |
| 5. | List | all payroll deductions: | | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5 | a. | \$ | 1,130 | .00 | \$ | | 669.00 | 0 | |
| | 5b. | Mandatory contributions for retirement plans | 5l | b. | \$ | | .00 | \$ | | 0.00 | | |
| | 5c. | Voluntary contributions for retirement plans | 50 | c. | \$ | 244 | .00 | \$ | | 159.00 | 0 | |
| | 5d. | Required repayments of retirement fund loans | 50 | d. | \$ | 608 | .00 | \$ | | 735.00 | 0 | |
| | 5e. | Insurance | | e. | \$_ | 372 | | \$_ | | 235.00 | | |
| | 5f. | Domestic support obligations | 5f | | \$_ | | .00 | \$_ | | 0.00 | _ | |
| | 5g. | Union dues | 50 | _ | \$_ | | .00 | \$_ | | 36.00 | | |
| | 5h. | Other deductions. Specify: Charity | _ | h.+ | . – | | .00 | | | 2.00 | | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 2,354 | | \$_ | | ,836.00 | | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 2,534 | .00 | \$_ | 1 | ,350.00 | 0_ | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | | |
| | | monthly net income. | 88 | | \$_ | 0 | .00 | \$_ | | 0.00 | | |
| | 8b. | Interest and dividends | 81 | b. | \$_ | 0 | .00 | \$_ | | 0.00 | <u>)</u> | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 80 | C. | \$ | 0 | .00 | \$ | | 0.00 |) | |
| | 8d. | Unemployment compensation | 80 | d. | \$ | 0 | .00 | \$ | | 0.00 |) | |
| | 8e. | Social Security | 86 | e. | \$ | 0 | .00 | \$ | | 0.00 |) | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | e 8f 8g | | \$_ \$_ | | .00 .00 | \$_ \$_ | | 0.00 | | |
| | 8h. | Other monthly income. Specify: | | y. h.+ | * | | | + \$ | | 0.00 | | |
| | OII. | - The monthly moone. Openly. | _ 01 | · · · · · | Ψ_ | | .00 | · Ψ_ | | 0.00 | | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | | \$ | 0 | .00 | \$_ | | 0.0 | 00 | |
| 10. | Calo | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 2,534.00 | + \$ | 1 | ,350.00 | = \$ | 3,884.0 | 0 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | * - | | 2,0000 | | | ,000.00 | | 0,00 | _ |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | dep | | | | | • | Schedul | e J. +\$ | 0.0 | 0 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | | e. 12. | \$ | 3,884.0 | 0 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | | Comb | ined nly income | |
| | | No. | | | | | | | | | | |
| | П | Yes. Explain: | | | | | | | | | | _ |

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| | in this informs | tion to identify yo | 00001 | | | 1 | | | | |
|------------|--|---|-------------------------------------|--|---|------------------------|-------|---------------------------------------|--|-----|
| | in this iniorna | tion to identify yo | ur case. | | | | | | | |
| Deb | tor 1 | Robert E Stu | dzinski | | | | | if this is: | | |
| Deb | tor 2 | Maryann T S | tudzinsk | i | | | Α | | wing postpetition chapt | er |
| (Spo | ouse, if filing) | | | | | | 13 | 3 expenses as of | the following date: | |
| Unit | ed States Bankr | ruptcy Court for the: | NORTH | ERN DISTRICT OF ILLIN | NOIS | | М | M / DD / YYYY | | |
| 1 | e number nown) | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | • | • | | | | |
| | | J: Your I | Evner | 1808 | | | | | 1 | 2/1 |
| Be info | as complete a ormation. If m mber (if know | and accurate as ore space is ned n). Answer ever | possible eded, atta y questio | If two married people a ch another sheet to this | re filing together, be form. On the top of | oth are ed any addi | quall | y responsible fo al pages, write y | or supplying correct | |
| Par 1. | t 1: Descr Is this a joir | ibe Your House | hold | | | | | | | |
| ١. | □ No. Go to | | | | | | | | | |
| | _ | s Debtor 2 live i | n a separ | ate household? | | | | | | |
| | ■ N | 0 | • | | | | | | | |
| | _ `` | _ | t file Offici | al Form 106J-2, Expense | s for Separate House | ehold of De | ebtor | · 2. | | |
| 2. | Do vou have | e dependents? | □ No | | | | | | | |
| | Do not list D Debtor 2. | - | Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | | Dependent's age | Does dependent live with you? | |
| | Do not state dependents | | | | Dependent | | _ | 17 | □ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No | |
| 3. Par | expenses o | penses include f people other th d your depender ate Your Ongoin | nan nts? | No Yes y Expenses | | | | | ☐ Yes | |
| Est exp | imate your ex | cpenses as of yo | our bankrı | uptcy filing date unless y is filed. If this is a sup | | | | | | |
| the | | h assistance and | | government assistance cluded it on <i>Schedule I:</i> | | | | Your exp | enses | |
| 4. | | or home owners and any rent for the | | ses for your residence. r lot. | Include first mortgage | e 4. | \$ | | 1,725.00 | |
| | If not includ | led in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | | rty, homeowner's | | | | 4b. | \$ | | 0.00 | |
| | | maintenance, re owner's associati | • | ipkeep expenses | | 4c. 4d. | | | 25.00 | |
| 5. | | | | our residence, such as h | ome equity loans | | \$ | | 0.00 0.00 | |

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| | otor 1 otor 2 | | E Studzinski nn T Studzinski | Case num | aber (if known) | |
|-----|------------------|--------------|--|------------|-----------------|-----------------------------|
| 6. | Utilit | ties: | | | | |
| | 6a. | Electricity | y, heat, natural gas | 6a. | \$ | 300.00 |
| | 6b. | Water, se | ewer, garbage collection | 6b. | \$ | 40.00 |
| | 6c. | Telephor | ne, cell phone, Internet, satellite, and cable services | 6c. | \$ | 450.00 |
| | 6d. | Other. Sp | pecify: | 6d. | \$ | 0.00 |
| 7. | Food | d and hou | sekeeping supplies | 7. | \$ | 600.00 |
| 8. | Child | dcare and | children's education costs | 8. | \$ | 115.00 |
| 9. | Clot | hing, laun | dry, and dry cleaning | 9. | \$ | 200.00 |
| 10. | Pers | onal care | products and services | 10. | \$ | 100.00 |
| 11. | Medi | ical and d | ental expenses | 11. | \$ | 551.00 |
| 12. | | | n. Include gas, maintenance, bus or train fare. car payments. | 12. | \$ | 850.00 |
| 13 | | | t, clubs, recreation, newspapers, magazines, and boo | | · | 100.00 |
| | | | ntributions and religious donations | 14. | | 75.00 |
| | | rance. | na ibations and rengious defiations | 17. | Ψ | 75.00 |
| 10. | | | insurance deducted from your pay or included in lines 4 c | r 20. | | |
| | | Life insu | , , , | 15a. | \$ | 100.00 |
| | 15b. | Health in | nsurance | 15b. | \$ | 0.00 |
| | 15c. | Vehicle i | nsurance | 15c. | \$ | 350.00 |
| | 15d. | Other ins | surance. Specify: Renter's Insurance | 15d. | \$ | 16.00 |
| 16. | Taxe | es. Do not i | include taxes deducted from your pay or included in lines | 4 or 20. | - | |
| | Spec | cify: | | 16. | \$ | 0.00 |
| 17. | | | lease payments: | 170 | œ. | 0.40.00 |
| | | | ments for Vehicle 1 | 17a. | | 240.00 |
| | | | ments for Vehicle 2 | 17b. | · | 140.00 |
| | | Other. Sp | · · · | 17c. | · - | 0.00 |
| 40 | | Other. Sp | | 17d. | 5 | 0.00 |
| 18. | | | s of alimony, maintenance, and support that you did n your pay on line 5, <i>Schedule I, Your Income</i> (Official | | \$ | 0.00 |
| 19. | | | its you make to support others who do not live with y | | \$ | 175.00 |
| | | | erly, ill parents | 19. | | 170.00 |
| 20. | | | perty expenses not included in lines 4 or 5 of this for | | our Income. | |
| | | | es on other property | 20a. | | 0.00 |
| | | Real esta | | 20b. | \$ | 0.00 |
| | 20c. | Property | , homeowner's, or renter's insurance | 20c. | | 0.00 |
| | | | ance, repair, and upkeep expenses | 20d. | | 0.00 |
| | | | ner's association or condominium dues | 20e. | \$ | 0.00 |
| 21. | Othe | r: Specify: | : | 21. | +\$ | 0.00 |
| | | . , | | | | |
| 22. | | - | r monthly expenses | | | |
| | | | 4 through 21. | | \$ | 6,152.00 |
| | 22b. | Copy line | 22 (monthly expenses for Debtor 2), if any, from Official F | orm 106J-2 | \$ | |
| | 22c. | Add line 2 | 2a and 22b. The result is your monthly expenses. | | \$ | 6,152.00 |
| 23. | Calc | ulate your | r monthly net income. | | | |
| | 23a. | Copy line | e 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,884.00 |
| | 23b. | Сору уог | ur monthly expenses from line 22c above. | 23b. | -\$ | 6,152.00 |
| | 23c | Subtract | your monthly expenses from your monthly income. | | | |
| | 200. | | Ilt is your <i>monthly net income</i> . | 23c. | \$ | -2,268.00 |
| 24. | For e | xample, do y | t an increase or decrease in your expenses within the you expect to finish paying for your car loan within the year or do le terms of your mortgage? | | | se or decrease because of a |
| | | | Explain here: | | | |
| | \square Y | es. | шириант неге. | | | |

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| Fill in this | information to identify your | · case: | | |
|-----------------------------------|--|--|--|---|
| Debtor 1 | Robert E Studzir | | | |
| Debior 1 | First Name | Middle Name | Last Name | |
| Debtor 2 | Maryann T Studz | zinski | | |
| (Spouse if, fili | | Middle Name | Last Name | |
| United Sta | ites Bankruptcy Court for the: | NORTHERN DISTRIC | CT OF ILLINOIS | |
| Case num | ber | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| f two mari You must tobtaining | ried people are filing togethe | er, both are equally respired by scheduling the connection with a ba | | |
| | Sign Below | | | |
| Did y | ou pay or agree to pay some | eone who is NOT an att | orney to help you fill out bankrupt | cy forms? |
| | No | | | |
| | Yes. Name of person | | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| | r penalty of perjury, I declare ney are true and correct. | e that I have read the su | mmary and schedules filed with th | nis declaration and |
| | s/ Robert E Studzinski | | X /s/ Maryann T Stu | |
| | obert E Studzinski ignature of Debtor 1 | | Maryann T Studzi Signature of Debtor 2 | |
| D | ate June 14, 2016 | | Date _ June 14, 2 0 | 116 |

| Fill in this infor | matian ta idantify yay | | | | |
|--------------------------------|---|--|---|--|---|
| | mation to identify you | | | | |
| Debtor 1 | Robert E Studzi | nski Middle Name | Last Name | | |
| Debtor 2 | Maryann T Stud | | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Office Glates Be | and aptoy Court for the. | | | | |
| Case number | | | | | No call 20 (b.Ca. Ca. ca. |
| (II KNOWN) | | | | | Check if this is an Imended filing |
| | | | | | inonded ming |
| 000 : 15 | 407 | | | | |
| Official Fo | | | | | |
| Statement | of Financial | Affairs for Individ | luals Filing for B | ankruptcy | 4/16 |
| information. If n | | attach a separate sheet to | | equally responsible for sup y additional pages, write you | |
| Part 1: Give | Details About Your Ma | arital Status and Where You | Lived Before | | |
| 1. What is you | ır current marital statı | ıs? | | | |
| ■ Married | ١ | | | | |
| ■ Married | - | | | | |
| | | | | | |
| 2. During the | last 3 years, have you | lived anywhere other than v | where you live now? | | |
| □ No | | | | | |
| Yes. Li | st all of the places you | ived in the last 3 years. Do no | ot include where you live now | I. | |
| Debtor 1 P | rior Address: | Dates Debtor 1 | Debtor 2 Prior Ad | dress: | Dates Debtor 2 |
| 26249 S F | Rachel | From-To: | Same as Debtor | 1 | Same as Debtor 1 |
| Channah | on, IL 60410 | 2012 -5/2015 | | | From-To: |
| states and territor No Yes. M | ries include Arizona, Ca | lifornia, Idaho, Louisiana, Nev | vada, New Mexico, Puerto R | ity property state or territor ico, Texas, Washington and V | |
| Part 2 Expla | in the Sources of You | r Income | | | |
| Fill in the tot | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | ill businesses, including part | | ndar years? |
| □ No | | | | | |
| Yes. Fi | II in the details. | | | | |
| | | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | of current year until ed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$29,513.00 | ■ Wages, commissions, bonuses, tips | \$15,676.00 |
| | | ☐ Operating a business | | ☐ Operating a business | |
| Official Form 107 | | Statement of Financial Affa | airs for Individuals Filing for B | ankruptcy | page 1 |

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| Debtor 2 Maryann T Studzinski | | | Case | se number (if known) | | | |
|-------------------------------|--|--|---|---|--|-----------------------------------|---|
| | | | Debtor 1 | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inco Check all that app | | Gross income (before deductions and exclusions) |
| | alendar year: 1 to December | 31, 2015) | ■ Wages, commissions, bonuses, tips | \$100,152.00 | ☐ Wages, comm bonuses, tips | issions, | \$0.00 |
| | | | ☐ Operating a business | | Operating a but | usiness | |
| | alendar year be 1 to December | | ■ Wages, commissions, bonuses, tips | \$106,550.00 | ☐ Wages, comm bonuses, tips | issions, | \$0.00 |
| | | | ☐ Operating a business | | Operating a bu | usiness | |
| = 1 | ach source and t No Yes. Fill in the de | - | me from each source separat Debtor 1 | | Debtor 2 | | |
| | | etails. | | | | | |
| | | | Debtor 1 Sources of income | Gross income from | Debtor 2 Sources of inco | mo | Gross income |
| | | | Describe below. | each source (before deductions and exclusions) | Describe below. | iie | (before deductions and exclusions) |
| Part 3: | List Certain Pa | yments You | Made Before You Filed for I | Bankruptcy | | | |
| _ | No. Neither De individual p During the No. Yes | ebtor 1 nor D primarily for a 90 days befor Go to line 7. List below e paid that cre not include p | s debts primarily consumer ebtor 2 has primarily consupersonal, family, or household re you filed for bankruptcy, directly ach creditor to whom you paid tor. Do not include payment bayments to an attorney for the on 4/01/19 and every 3 years | Imer debts. Consumer debts d purpose." d you pay any creditor a tota d a total of \$6,425* or more intensity for domestic support obligations bankruptcy case. | l of \$6,425* or more n one or more paym ations, such as child | ? nents and th d support ar | ne total amount you nd alimony. Also, do |
| | | | r both have primarily consure you filed for bankruptcy, die | | I of \$600 or more? | | |
| | ■ No. | Go to line 7. | | | | | |
| | □ _{Yes} | include payr | ach creditor to whom you paiments for domestic support ol this bankruptcy case. | | | | |
| Cred | litor's Name and | d Address | Dates of payme | nt Total amount paid | Amount you still owe | Was this p | ayment for |
| | | | | | | | |

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Robert E Studzinski

| Del | otor 2 Maryann T Studzinski | | Cas | se number (if known) | | |
|-----|--|---|--|---|------------------------------------|--|
| 7. | Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony. | artners; relatives of any gen n control, or owner of 20% o | eral partners; partners r more of their voting | erships of which yog g securities; and a | ou are a general ny managing ag | partner; corporations jent, including one for |
| | No☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | his payment |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost | | ments or transfer a | any property on a | ccount of a de | bt that benefited an |
| | ■ No□ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | his payment or's name |
| Pai | rt 4: Identify Legal Actions, Repossessio | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | | | | | |
| | □ No■ Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | | | Status of the case | |
| | Synchrony Bank v. Robert E Studzinski 2016 SC 334 | Breach of Contract | Kendall County 1102 Cornell L Yorkville, IL 60 | n | ■ Pending □ On appea □ Conclude | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo | ccy, was any of your prope w. | erty repossessed, f | oreclosed, garnis | shed, attached | , seized, or levied? |
| | No. Go to line 11.Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | Explain what happened | i | | | ргоролту |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment becomes No ☐ Yes. Fill in the details. | | luding a bank or fii | nancial institutior | n, set off any ai | mounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date taker | action was | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | ion of an assigne | e for the benef | it of creditors, a |
| | | | | | | |

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| Debtor | Maryann T Studzinski | Case number | (if known) | |
|--|--|---|---|------------------------------|
| Dorá E | List Cartain Cifts and Cantributions | | | |
| Part 5 | | | | • |
| 3. vv i | | otcy, did you give any gifts with a total value of more t | nan \$600 per person | <i>(</i> |
| | | | | |
| | ifts with a total value of more than \$600 er person | Describe the gifts | Dates you gave the gifts | Value |
| | erson to Whom You Gave the Gift and ddress: | | | |
| 4. W i | | otcy, did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? |
| | Yes. Fill in the details for each gift or cor | ntribution. | | |
| m C | ifts or contributions to charities that tot nore than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | al Describe what you contributed | Dates you contributed | Value |
| 1 | st Mary's Catholic Church 9515 115th Ave Iokena, IL 60448 | Cash | Monthly contribution | \$75.00 |
| | | cy or since you filed for bankruptcy, did you lose any | thing because of thef | it, fire, other disaster |
| | No | | | |
| | Yes. Fill in the details. | | | |
| | ow the loss occurred | Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Part 7: | List Certain Payments or Transfers | | | |
| CO | onsulted about seeking bankruptcy or pr | cy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? sparers, or credit counseling agencies for services required | | rty to anyone you |
| | No | | | |
| | Yes. Fill in the details. | | | |
| A E | erson Who Was Paid ddress mail or website address erson Who Made the Payment, if Not Yo | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| B 1: S C | Bizar & Doyle, LLC 23 West Madison Street Suite 205 Chicago, IL 60602 De@bizardoylelaw.com | Attorney Fees | 2015 | \$2,700.00 |
| produced by the produced by th | omised to help you deal with your credit o not include any payment or transfer that you | cy, did you or anyone else acting on your behalf pay or or sor to make payments to your creditors? ou listed on line 16. Description and value of any property transferred | or transfer any prope Date payment or transfer was | rty to anyone who Amount of |
| ^ | | | made | payine |

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Debtor 1 Robert E Studzinski
Debtor 2 Maryann T Studzinski

Case number (if known)

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | |
|-----|--|---|---|--|---|--|--|--|
| | Person Who Received Transfer Address | Description and value of property transferred | | Describe any property payments received or o paid in exchange | | | | |
| | Person's relationship to you Brian & Amy Syfert 26249 Rachel Dr. Channahon, IL 60410 None | 26249 Rachele E Channahon, IL 6 \$279,000 Value v transferred | 60 4 10 | Received \$17,254.25 | May 31, 2015 | | | |
| 19. | Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details. | | y property to a sel | f-settled trust or similar | device of which you are a | | | |
| | Name of trust | Description and va | alue of the proper | ty transferred | Date Transfer was made | | | |
| 20. | sold, moved, or transferred? Include checking, savings, money market, or ot houses, pension funds, cooperatives, associati No Yes. Fill in the details. Name of Financial Institution and | tere any financial account ons, and other finan ons and other finan st 4 digits of count number | its; certificates of cial institutions. Type of account instrument | ents held in your name, deposit; shares in banks or Date account we closed, sold, moved, or transferred | as Last balance before closing or transfer | | | |
| 21. | cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had accondition Address (Number, State and ZIP Code) | ess to it? De | escribe the contents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or pl ■ No □ Yes. Fill in the details. | | home within 1 yea | ar before you filed for ba | nkruptcy? | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St State and ZIP Code) | | scribe the contents | Do you still have it? | | | |

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Debtor 1 Robert E Studzinski
Debtor 2 Maryann T Studzinski

Case number (if known)

| Par | 19: Identify Property You Hold or Control for | Someone Else | | | | | |
|-----|--|--|---------------------------------------|---------------------|--|--|--|
| 23. | Do you hold or control any property that someofor someone. | one else owns? Include any prope | ty you borrowed from, are storing fo | r, or hold in trust | | | |
| | No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | |
| Par | 110: Give Details About Environmental Information | ation | | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul | ir, land, soil, surface water, groun | | | | | |
| _ | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s | | s waste, hazardous substance, toxic | substance, | | | |
| Rep | ort all notices, releases, and proceedings that ye | ou know about, regardless of whe | n they occurred. | | | | |
| 24. | Has any governmental unit notified you that you | u may be liable or potentially liable | under or in violation of an environm | ental law? | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | |
| Par | t11: Give Details About Your Business or Con | nections to Any Business | | | | | |
| | Within 4 years before you filed for bankruptcy, | - | ny of the following connections to an | v business? | | | |
| | ☐ A sole proprietor or self-employed in a | • | , | , | | | |
| | ☐ A member of a limited liability company | | • | | | | |
| | ☐ A partner in a partnership | , and a second s | F X = 7 | | | | |
| | ☐ An officer, director, or managing execut | tive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting or | - | | | | | |

Case 16-19570 Doc 1 Filed 06/14/16 Entered 06/14/16 17:23:35 Desc Main Document Page 45 of 57 Robert E Studzinski Debtor 1 Debtor 2 Maryann T Studzinski Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert E Studzinski /s/ Maryann T Studzinski Robert E Studzinski Maryann T Studzinski Signature of Debtor 1 Signature of Debtor 2 Date June 14, 2016 Date June 14, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person

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| Fill in this infor | mation to identify your | case: | | |
|------------------------|--------------------------|-------------------|-------------|-----------------------------------|
| Debtor 1 | Robert E Studzin | ski | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Maryann T Studz | inski | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is amended filing |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|--|--|---|
| Creditor's Ally Financial name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of property securing debt: 2013 Chevrolet Malibu 30,600 miles Value based on NADA | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes |
| Creditor's Caf/Carmax Auto Finance name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of property securing debt: 2011 Chevrolet Malibu 45,000 miles Value based on NADA | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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| Debtor 1 Robert E Studzinski Debtor 2 Maryann T Studzinski | Case number (if known) |
|--|--|
| Lessor's name: | |
| Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my intention a | about any property of my estate that secures a debt and any personal |
| property that is subject to an unexpired lease. X /s/ Robert E Studzinski | X /s/ Maryann T Studzinski |
| Robert E Studziński | Maryann T Studzinski |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date June 14, 2016 | Date June 14, 2016 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapt | er 7: | Liquidation |
|-------|-------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-19570 Doc 1 Filed 06/14/16 Entered 06/14/16 17:23:35 Desc Main Document Page 52 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In | Robert E Studzinski re Maryann T Studzinski | | Case No. | |
|-----|--|--|--|-------------------------------------|
| | Maryam i Stademski | Debtor(s) | Chapter | 7 |
| | DIGGLOGUE OF COMPEN | | | EDTOD (C) |
| | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR DE | EBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy, | or agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 2,700.00 |
| | Prior to the filing of this statement I have received | | | 2,700.00 |
| | Balance Due | | \$ | 0.00 |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-disclosed compe | ensation with any other person | unless they are mem | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name | | | |
| 5. | In return for the above-disclosed fee, I have agreed to rer | nder legal service for all aspect | s of the bankruptcy o | ease, including: |
| | a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to regreaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour | ment of affairs and plan which rs and confirmation hearing, ar educe to market value; exe ns as needed; preparation | may be required; and any adjourned hea | rings thereof; |
| 6. | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc proceeding. | | | es or any other adversary |
| | | CERTIFICATION | | |
| thi | I certify that the foregoing is a complete statement of any s bankruptcy proceeding. | agreement or arrangement for | payment to me for r | epresentation of the debtor(s) in |
| | June 14, 2016 | /s/ Joseph R. Doy | /le | |
| | Date | Joseph R. Doyle Signature of Attorne Bizar & Doyle, LL 123 West Madiso | 6279065 .y .C | |
| | | Suite 205 | | |
| | | Chicago, IL 60602 312-427-3100 Fa | | |
| | | joe@bizardoylela | | |
| | | Name of law firm | | |

| Fill in this infor | rmation to identify your case: | | Cł | neck one | box only as c | irected in | this form and in Fo | rm |
|-----------------------------------|--|---|---|------------------------|-------------------------------------|-----------------------------|---|-----------|
| Debtor 1 | Robert E Studzinski | | | 2A-1Su | | | | |
| Debtor 2 (Spouse, if filing) | Maryann T Studzinski | | | ■ 1. Tł | nere is no pres | umption o | of abuse | |
| United States Case number | Bankruptcy Court for the: Northern District | of Illinois | | а | | nade und | ine if a presumption er <i>Chapter 7 Means</i> n 122A-2). | |
| (if known) | | | | | | | apply now because but it could apply la | |
| | | | | ☐ Che | eck if this is a | n amen | ded filing | |
| Official F | orm 122A - 1 | | | | | | | |
| | 7 Statement of Your Cu | rrent Mo | onthly Inc | come | 2 | | | 12/1 |
| Unapto i | 7 Statement of Tour Gu | | Zitciny iii | | | | | 12/1 |
| Part 1: Ca | ry service, complete and file Statement of Exem alculate Your Current Monthly Income your marital and filing status? Check one o | | umption of Abuse | e Under (| 5 707(b)(2) (Offi | cial Form | 122A-1Supp) with thi | s form. |
| 1 | narried. Fill out Column A, lines 2-11. | | | | | | | |
| | ed and your spouse is filing with you. Fill o | ut both Colum | no A and B lines | . 2 11 | | | | |
| | | | | 5 2-11. | | | | |
| | ed and your spouse is NOT filing with you. | • | | . 1 | N 1 D 12 | 0.44 | | |
| | ing in the same household and are not leg | | | | · · | | | |
| pe | ing separately or are legally separated. Fill nalty of perjury that you and your spouse are ng apart for reasons that do not include evad | legally separat | ted under nonba | nkruptcy | law that appli | es or that | | |
| 101(10A). Fo the 6 months | erage monthly income that you received from all or example, if you are filing on September 15, the 6-i , add the income for all 6 months and divide the total the same rental property, put the income from that | month period wor of by 6. Fill in the | uld be March 1 thro result. Do not inclu | ough Aug ide any ir | ust 31. If the ami come amount m | ount of you lore than o | r monthly income vari nce. For example, if b | ed durina |
| | | | | Colum Debto | | Columi Debtoi non-fil | | |
| payroll de | oss wages, salary, tips, bonuses, overtime eductions). | | ` | \$ | 0.00 | \$ | 0.00 | |
| Column I | and maintenance payments. Do not include B is filled in. | - | • | \$ | 0.00 | \$ | 0.00 | |
| of you o from an u and room | unts from any source which are regularly prour dependents, including child supporunmarried partner, members of your househound in a source of the control of | t. Include regu ld, your depend | lar contributions dents, parents, | \$ | 0.00 | \$ | 0.00 | |
| 1 · | Do not include payments you listed on line 3. ome from operating a business, profession | or farm | | Ψ | | Ψ | <u> </u> | |
| J. 1460 11100 | | | ebtor 1 | | | | | |
| Gross re | ceipts (before all deductions) | \$ 0.0 | 0 | | | | | |
| 1 | and necessary operating expenses | -\$ 0.0 | 0 | | | | | |
| 1 | thly income from a business, profession, or fa | rm \$ 0.0 | O Copy here - | > \$ | 0.00 | \$ | 0.00 | |
| 6. Net inco | me from rental and other real property | | | | | | - | |
| | | | ebtor 1 | | | | | |
| Gross re | ceipts (before all deductions) | \$ 0.0 | 0 | | | | | |

0.00

0.00 Copy here -> \$

0.00

0.00

Ordinary and necessary operating expenses

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

0.00

0.00

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Debtor 1 Debtor 2 Robert E Studzinski Maryann T Studzinski

Case number (if known)

| | | | 3 · · · · · | Column Debtor | | Column B Debtor 2 c | | |
|------|---|---|-------------|------------------|---------------|---------------------|------------------------------|----------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | 0.00 | |
| | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here: | t received was a bene | fit under | | | | | |
| | For you\$ | 0 | .00_ | | | | | : |
| | For your spouse \$ | | .00 | | | | | |
| 9. | Pension or retirement income . Do not include any ambenefit under the Social Security Act. | nount received that wa | as a | \$ | 0.00 | \$ | 0.00 | |
| 10. | Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below. | Security Act or payme manity, or internationa I separate page and p | nts I or | \$ | 0.00 | \$ | 0.00 | |
| | | | | \$ | 0.00 | \$ | 0.00 | |
| | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | 0.00 | |
| 11. | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total | | \$ | 0.00 | + | 0.00 | = \$ 0.00 | - Landan |
| | <u> </u> | | | | | | Total current monthly income | |
| Part | 2: Determine Whether the Means Test Applies to | o You | | | | | | |
| 12. | Calculate your current monthly income for the year. | . Follow these steps: | | | | | | |
| | 12a. Copy your total current monthly income from line 1 | 11 | | C | opy line 11 | here=> | \$0.00 | |
| | Multiply by 12 (the number of months in a year) | | | | | | | |
| | • • | | | | | | x 12 | 1 |
| | 12b. The result is your annual income for this part of the | e form | | | | 121 | b. \$ | |
| 13. | Calculate the median family income that applies to | you. Follow these ste | ps: | | | | | ' |
| | Fill in the state in which you live. | IL | | | | | | |
| | Fill in the number of people in your household. | 2 | | | | | | |
| | Fill in the median family income for your state and size | of household. | | | | 13. | . \$ 63,896.00 | |
| | To find a list of applicable median income amounts, go for this form. This list may also be available at the bank | online using the link | specified | in the sep | arate instru | ctions | | |
| 14. | How do the lines compare? | | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. O Go to Part 3. | n the top of page 1, c | heck box | 1, There | is no presur | mption of abu | se. | |
| | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | of page 1, check box 2 | 2, The pre | esumption | of abuse is | determined b | by Form 122A-2. | |
| Part | . , | | | | | | | |
| | By signing here, I declare under penalty of perjury | that the information of | on this sta | atement a | nd in any att | tachments is | true and correct. | \dashv |
| | X Mayand Studyinski Signature of Debtor 1 X Mayand T Studyinski Signature of Debtor 2 | | | | | | | |
| | Date MM/DD/YYYY | Date ₋ | MM / DD | 4-1 | 5-14 | ? | | |
| | If you checked line 14a, do NOT fill out or file Forr | | | | | | | |
| | If you checked line 14b, fill out Form 122A-2 and f | ile it with this form. | | | | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Maryann T Studzinski | | Case No. | |
|-------|--|---|-------------------|---------------------------|
| | | Debtor(s) | Chapter | 7 |
| | VE | RIFICATION OF CREDITOR I | MATRIX | |
| | | Number o | f Creditors: | 18 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of cred | itors is true and | correct to the best of my |
| Date: | June 14, 2016 | /s/ Robert E Studzinski Robert E Studzinski Signature of Debtor | | |
| Date: | June 14, 2016 | /s/ Maryann T Studzinski | | |
| | | Maryann T Studzinski Signature of Debtor | | |

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Caf/Carmax Auto Finance Attn: Bankruptcy Po Box 440609 Kennesaw, GA 30160

Capital Management Services 698 1/2 South Ogden Street Buffalo, NY 14206

Citibank Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195

Citibank/The Home Depot Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Diane T Nauer 33 N Dearborn St. Suite 1301 Chicago, IL 60602

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Diversified Consultants, Inc. PO Box 1022 Wixom, MI 48393

Elan Financial Service 777 E Wisconsin Ave Milwaukee, WI 53202 Fifth Third Bank Fifth Third Bank Bankruptcy Department, 1830 East Paris Ave. Se Grand Rapids, MI 49546

First Step Group, LLC 6300 Shingle Creek Parkway Suite 220 Minneapolis, MN 55430

Gemb/walmart Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

IC System Inc 444 Highway 96 East PO Box 64378 Saint Paul, MN 55164

Meyer & Njus 1100 US Bank Plaza 200 South Sixth Street Minneapolis, MN 55402

Onemain Fi Po Box 499 Hanover, MD 21076

Sears/cbna Po Box 6282 Sioux Falls, SD 57117

Syncb/discount Tire C/o Po Box 965036 Orlando, FL 32896